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DATE: October 10, 2006

PTO IDENTIFIER: Application Number 10/803,973-Conf. #006496
Patent Number

Inventor: Tse-Hsiang HSU et al.

MESSAGE TO: US Patent and Trademark Office

FAX NUMBER: (571) 273-8300

FROM: BIRCH, STEWART, KOLASCH & BIRCH, LLP

Joe McKinney Muncy

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Attorney Dkt. #: 3722-0185PUS1

PAGES (Including Cover Sheet): 14

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- Certificate of Transmission (1 page)

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PTO/SB/07 (09-04)

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Application No. (If known): 10/803,973

Attorney Docket No.: 3722-0185PLUS1

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Fee Transmittal (1 page)

Amendment in Response to Non-Final Office Action (9 pages)

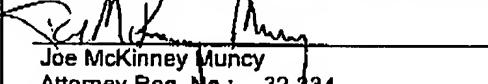
Amendment Transmittal (1 page)

One Month Request for Extension of Time Under 37 CFR 1.136(a) (1 page)

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AMENDMENT TRANSMITTAL LETTER				Docket No. 3722-0185PUS1	
Application No.	Filing Date			Examiner	Art Unit.
10/803,973-Conf. #006496	March 19, 2004			Tri T Ton	2877
Applicant(s): Tse-Hsiang HSU et al.					
Invention: AUTOMATIC POWER CONTROLLER					
<p>MS Amendment Commissioner for Patents P.O. Box 1450 Alexandria, VA 22313-1450</p> <p>Transmitted herewith is an amendment in the above-identified application. The fee has been calculated and is transmitted as shown below.</p>					
CLAIMS AS AMENDED					
Claims Remaining After Amendment	Highest Number Previously Paid	Number Extra Claims Present	Rate		
Total Claims	9 - 20 =	0	x 50.00	0.00	
Independent Claims	1 - 3 =	0	x 200.00	0.00	
Multiple Dependent Claims (check if applicable) <input type="checkbox"/>					
Other fee (please specify): Extension for response within first month 120.00					
TOTAL ADDITIONAL FEE FOR THIS AMENDMENT: 120.00					
<input checked="" type="checkbox"/> Large Entity <input type="checkbox"/> Small Entity <input type="checkbox"/> No additional fee is required for this amendment. <input checked="" type="checkbox"/> Please charge Deposit Account No. 02-2448 In the amount of \$ 120.00 A duplicate copy of this sheet is enclosed. <input type="checkbox"/> A check in the amount of \$ _____ is enclosed. <input type="checkbox"/> Payment by credit card. Form PTO-2038 is attached. <input checked="" type="checkbox"/> The Director is hereby authorized to charge and credit Deposit Account No. 02-2448 as described below. A duplicate copy of this sheet is enclosed. <input checked="" type="checkbox"/> Credit any overpayment. <input checked="" type="checkbox"/> Charge any additional filing or application processing fees required under 37 CFR 1.16 and 1.17.					
Dated: October 10, 2006					
 Joe McKinney Muncy Attorney Reg. No.: 32,334					
BIRCH, STEWART, KOLASCH & BIRCH, LLP 8110 Gatehouse Road Suite 100 East P.O. Box 747 Falls Church, Virginia 22040-0747					
I hereby certify that this paper (along with any paper referred to as being attached or enclosed) is being transmitted by facsimile to the Patent and Trademark Office, facsimile no. (571) 273-8300, on the date shown below. Dated: October 10, 2006 Signature:  (Christine Magulas)					

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FAX NO. 703 205 8050 RECEIVED P. 04
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PTO/SB/17 (07-06)

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Effective on 12/08/2004.
Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).

FEET TRANSMITTAL
For FY 2005

 Applicant claims small entity status. See 37 CFR 1.27**TOTAL AMOUNT OF PAYMENT** (\$ 120.00)

Complete If Known	
Application Number	10/803,973-Conf. #006496
Filing Date	March 19, 2004
First Named Inventor	Tse-Hsiang HSU
Examiner Name	Tri T Ton
Art Unit	2877
Attorney Docket No.	3722-0185PUS1

METHOD OF PAYMENT (check all that apply)

Check Credit Card Money Order None Other (please identify): _____

Deposit Account Deposit Account Number: 02-2448 Deposit Account Name: Birch, Stewart, Kolasch & Birch, LLP

For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)

Charge fee(s) indicated below Charge fee(s) indicated below, except for the filing fee

Charge any additional fee(s) or underpayment of fee(s) under 37 CFR 1.16 and 1.17 Credit any overpayments

FEE CALCULATION**1. BASIC FILING, SEARCH, AND EXAMINATION FEES**

Application Type	FILING FEES		SEARCH FEES		EXAMINATION FEES		Fee Paid (\$)
	Fee (\$)	Small Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)	
Utility	300	150	500	250	200	100	
Design	200	100	100	50	130	65	
Plant	200	100	300	150	160	80	
Reissue	300	150	500	250	600	300	
Provisional	200	100	0	0	0	0	

2. EXCESS CLAIM FEES**Fee Description**

Each claim over 20 (including Reissues)

Small Entity	
Fee (\$)	Fee (\$)
50	25
200	100

Each independent claim over 3 (including Reissues)

360 . 180

Multiple dependent claims

Total Claims	Extra Claims	Fee (\$)	Fee Paid (\$)
0	- 20 = 0	x 50.00	= 0.00

Multiple Dependent Claims	
Fee (\$)	Fee Paid (\$)

HP = highest number of total claims paid for, if greater than 20.

Indep. Claims	Extra Claims	Fee (\$)	Fee Paid (\$)
0	- 3 = 0	x 200.00	= 0.00

HP = highest number of independent claims paid for, if greater than 3.

3. APPLICATION SIZE FEE

If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).

Total Sheets	Extra Sheets	Number of each additional 50 or fraction thereof	Fee (\$)	Fee Paid (\$)
100	- 100 = 0	/50	(round up to a whole number) x	=

4. OTHER FEE(S)

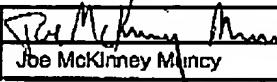
Non-English Specification, \$130 fee (no small entity discount)

Fee Paid (\$)

Other (e.g., late filing surcharge): 1251 Extension for response within first month

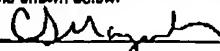
120.00

SUBMITTED BY

Signature		Registration No. (Attorney/Agent)	32,334	Telephone	(703) 205-8026
Name (Print/Type)	Joe McKinney Muncy			Date	October 10, 2006

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Dated: October 10, 2006

Signature: 

(Christine Magatas)